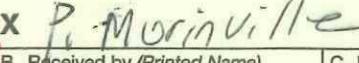


|  |  |   |  |
|--|--|---|--|
| <b>SENDER: COMPLETE THIS SECTION</b>   |  | <b>FILED</b><br><b>COMPLETE THIS SECTION ON DELIVERY</b>  |  |
| <ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul> |  |   |  |
| 1. Article Addressed to:<br><b>CLERK, U.S. DISTRICT COURT</b><br><b>EASTERN DISTRICT OF TEXAS</b><br><i>Paul Morinville<br/>514 Wharton Avenue<br/>Altoona, PA 16602</i>   |  | A. Signature<br><br><input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee<br>B. Received by (Printed Name)<br><i>SA 26 C19</i> C. Date of Delivery<br><i>01/27/22</i><br>D. Is delivery address different from item 1? <input type="checkbox"/> Yes<br>If YES, enter delivery address below: <input type="checkbox"/> No<br><i>420 CUV 980<br/>[66]</i>  |  |
| 2. Article Number (Transfer from service label)<br><i>7019 1120 0002 3229 7411</i>   |  |   |  |
|  |  | 3. Service Type<br><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®<br><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™<br><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery<br><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™<br><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation<br><input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Restricted Delivery |  |
| PS Form 3811, July 2020 PSN 7530-02-000-9053      Domestic Return Receipt  |  |   |  |